

Review of: "Procedural Sedation in Dentistry Using Alpha-2 Agonists: Clinical Cases"

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Potential competing interests: No potential competing interests to declare.

Dear authors,

Good work done. This article will give a useful information on the use of dexmedetomidine in procedural sedation in the field of dentistry...I would like to suggest the following....

1. Title can be modified as you have used only dexmedetomidine in both the cases..
2. Any bolus doses of dexmedetomidine used before starting infusion ...?
3. Though Dexmedetomidine is a good drug for procedural sedation it causes a borderline hemodynamic instabilityand propofol as TIVA was used and Thiopentone was used before the start of procedure.... which causes a significant fall in blood pressure.... Any vasopressors used in such cases ...?
4. Hemodynamic parameters should be catagorized like before the procedure, 15 mins , 30 mins, 1 hour, 2 hourand so on intraoperatively...
5. In the first case, as the patient is obese and elderly.. any OSA ruled out , whether the patient was on CPAP or BiPAP , any emergency arrangements made in case the patients airway needs to be secured...needs to be mentioned?
6. Kindly avoid short terms.... and provide with all the abbreviations used throughout the article.
7. Mention about the RASS score intraoperatively...
8. Ketamine is a good drug which combats the hemodynamic profile of dexmedetomidine... (ketdex) combination is a good cocktail in terms of sedation, analgesia, recovery, hemodynamic profile.
9. Too many references....can come down ..